

County: Calumet
 CHILTON HEALTH AND REHABILITATION
 810 MEMORIAL DRIVE

Facility ID: 2130

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CHILTON 53014 Phone: (920) 849-2308
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 76
 Total Licensed Bed Capacity (12/31/01): 97
 Number of Residents on 12/31/01: 58

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 59

Corporation
 Skilled
 No
 Yes
 Yes
 59

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		39.7
Supp. Home Care-Personal Care	No					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	3.4	Under 65	5.2	More Than 4 Years		10.3
Day Services	Yes	Mental Illness (Org./Psy)	8.6	65 - 74	10.3			-----
Respite Care	Yes	Mental Illness (Other)	13.8	75 - 84	32.8			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	34.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.7	95 & Over	17.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	6.9		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	29.3	65 & Over	94.8	-----		
Transportation	No	Cerebrovascular	20.7		-----	RNs		5.7
Referral Service	No	Diabetes	15.5	Sex	%	LPNs		7.0
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	37.9	Aides, & Orderlies		
Mentally Ill	Yes		-----	Female	62.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	8	100.0	229	30	83.3	92	0	0.0	0	13	92.9	127	0	0.0	0	0	0.0	0	51	87.9
Intermediate	---	---	---	6	16.7	77	0	0.0	0	1	7.1	117	0	0.0	0	0	0.0	0	7	12.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		36	100.0		0	0.0		14	100.0		0	0.0		0	0.0		58	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	29.2	Daily Living (ADL)		One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	22.4		22.4	58
Other Nursing Homes	0.0	Dressing	10.3		43.1	58
Acute Care Hospitals	62.5	Transferring	15.5		39.7	58
Psych. Hosp. -MR/DD Facilities	1.4	Toilet Use	17.2		46.6	58
Rehabilitation Hospitals	6.9	Eating	55.2		3.4	58
Other Locations	0.0	*****				
Total Number of Admissions	72	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		25.9
Private Home/No Home Health	48.6	Occ/Freq. Incontinent of Bladder	43.1	Receiving Tracheostomy Care		1.7
Private Home/With Home Health	1.4	Occ/Freq. Incontinent of Bowel	34.5	Receiving Suctioning		1.7
Other Nursing Homes	1.4			Receiving Ostomy Care		0.0
Acute Care Hospitals	6.8	Mobility		Receiving Tube Feeding		1.7
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	6.9	Receiving Mechanically Altered Diets		31.0
Rehabilitation Hospitals	0.0					
Other Locations	1.4	Skin Care		Other Resident Characteristics		
Deaths	40.5	With Pressure Sores	5.2	Have Advance Directives		94.8
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	74			Receiving Psychoactive Drugs		82.8

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio %	Bed Size: 50-99 Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %
Occupancy Rate: Average Daily Census/Licensed Beds	59.4	82.7	0.72	85.1	0.70
Current Residents from In-County	98.3	82.1	1.20	80.0	1.23
Admissions from In-County, Still Residing	31.9	18.6	1.71	20.9	1.53
Admissions/Average Daily Census	122.0	178.7	0.68	144.6	0.84
Discharges/Average Daily Census	125.4	179.9	0.70	144.8	0.87
Discharges To Private Residence/Average Daily Census	62.7	76.7	0.82	60.4	1.04
Residents Receiving Skilled Care	87.9	93.6	0.94	90.5	0.97
Residents Aged 65 and Older	94.8	93.4	1.02	94.7	1.00
Title 19 (Medicaid) Funded Residents	62.1	63.4	0.98	58.0	1.07
Private Pay Funded Residents	24.1	23.0	1.05	32.0	0.75
Developmentally Disabled Residents	3.4	0.7	4.92	0.9	3.77
Mentally Ill Residents	22.4	30.1	0.74	33.8	0.66
General Medical Service Residents	0.0	23.3	0.00	18.3	0.00
Impaired ADL (Mean)	53.8	48.6	1.11	48.1	1.12
Psychological Problems	82.8	50.3	1.65	51.0	1.62
Nursing Care Required (Mean)	8.4	6.2	1.36	6.0	1.39